

United States District Court
For The District of Delaware

Ronald G. Johnson

Plaintiff

v.

United States of America et al.

Defendant(s)

**APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT**

CASE NUMBER: CR 05-29

I, Ronald G. Johnson

declare that I am the (check appropriate box)

• • Petitioner/Plaintiff/Movant • • Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

FILED
MAY 19 2006

U.S. DISTRICT COURT
DISTRICT OF DELAWARE

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? • Yes • No (If "No" go to Question

Howard R. Young (Correctional) Institution

If "YES" state the place of your incarceration 1301 East 12th Street Wilmington Delaware 19809

Inmate Identification Number (Required): #182421

Are you employed at the institution? No Do you receive any payment from the institution? No

Attach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions O.K.

2. Are you currently employed? • Yes • No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a and give the name and address of your employer. N.A.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

N.A. I been Incarcerate over 4 years or so

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|-----------------------------|---------------------------------------|
| a. Business, profession or other self-employment | • <input type="radio"/> Yes | • <input checked="" type="radio"/> No |
| b. Rent payments, interest or dividends | • <input type="radio"/> Yes | • <input checked="" type="radio"/> No |
| c. Pensions, annuities or life insurance payments | • <input type="radio"/> Yes | • <input checked="" type="radio"/> No |
| d. Disability or workers compensation payments | • <input type="radio"/> Yes | • <input checked="" type="radio"/> No |
| e. Gifts or inheritances | • <input type="radio"/> Yes | • <input checked="" type="radio"/> No |
| f. Any other sources | • <input type="radio"/> Yes | • <input checked="" type="radio"/> No |

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive.

AO 240 Reverse (Rev. 10/03)
DELAWARE (Rev. 4/05)

4. Do you have any cash or checking or savings accounts? • Yes • No
- If "Yes" state the total amount \$ N, A. - 0 -
5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? • Yes • No
- If "Yes" describe the property and state its value. N, A.
6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state *NONE* if applicable. N, A.
- N, A.

I declare under penalty of perjury that the above information is true and correct.

May 12, 2006
DATE

Ronald Johnson

SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

RESIDENT HISTORY REPORT

Page 1 of 1

HRYCI
03/02/06 10:20
ST 007 / OPR JMH

SBI : 182421
Resident Name : JOHNSON, RONALD G
Time Frame : 05/11/2005 12:33 - 03/02/2006 10:20

Date	Time	Type	ST	OPR	Receipt #	Amount	Balance
05/11/2005	12:33	Intake	4	SED	D25363	50.00	50.00
05/13/2005	16:13	Rec Payment	7	kjg	G5461	6.47	43.53
05/24/2005	11:57	Order	2	DDT	B64915	18.12	25.41
06/01/2005	10:14	Order	2	DDT	B65691	22.00	3.41
06/08/2005	10:14	Order	2	DDT	B66784	3.36	0.05
02/15/2006	13:13	Add	8	RP	H18789	20.00	20.05
02/22/2006	08:39	Order	2	DDT	B102794	17.93	2.12
02/27/2006	09:25	Rec Payment	6	kjg	F17062	1.93	0.19
03/01/2006	09:10	Order	2	WLH	B103957	0.13	0.06

RESIDENT HISTORY REPORT

Page 1 of 1

HRYCI
05/04/06 10:26
ST 006 / OPR KJG

SBI : 182421
Resident Name : JOHNSON, RONALD G
Time Frame : 05/11/2005 12:33 - 05/04/2006 10:26

Date	Time	Type	ST	OPR	Receipt #	Amount	Balance
05/11/2005	12:33	Intake	4	SED	D25363	50.00	50.00
05/13/2005	16:13	Rec Payment	7	kjg	G5461	6.47	43.53
05/24/2005	11:57	Order	2	DDT	B64915	18.12	25.41
06/01/2005	10:14	Order	2	DDT	B65691	22.00	3.41
06/08/2005	10:14	Order	2	DDT	B66784	3.36	0.05
02/15/2006	13:13	Add	8	RP	H18789	20.00	20.05
02/22/2006	08:39	Order	2	DDT	B102794	17.93	2.12
02/27/2006	09:25	Rec Payment	6	kjg	F17062	1.93	0.19
03/01/2006	09:10	Order	2	WLH	B103957	0.13	0.06